

From: [Werner, Robert](#)
To: [Mueller, Brian](#)
Cc: [Moran, Gloria](#)
Subject: Falcon Refinery (06MC) - Access Agreement, Sample Insurance Certificate for an Additional Named Insured Party on Your Contractor's Insurance Policy
Date: Wednesday, August 14, 2013 12:22:00 PM
Attachments: [Insurance Rider - Sample July 2013.pdf](#)

Brian,

In block title "Producer" your contractor's insurer should enter its name.

In the block titled "Insured" your contractor insurer should enter the name of the insured party, i.e., your contractor.

In the blocks titled "Type of Insurance, Policy Number(s), Policy Effective Date(s), Policy Expiration Date(s), and Limits" your contractor's insurer should enter the applicable policy information.

In the block titled "Description of Operations/Location/Special Items" your contractor's insurer should enter Site described as it appears in the AOC, i.e., "The Falcon Refinery Site located in Ingleside, San Patricio County, Texas 1.7 miles southeast of State Highway 361 on FM 2725 at the northwest and southeast corners of FM 2725 and Bishop Road." Gloria has agreed this same description can be used in place of a street address to adequately describe the Site's location on a document from your Contractor's insurer.

In the block titled "Certificate Holder" your contractor's insurer should enter "Lazarus Texas Refinery I, LLC, 801 Travis Street, Suite 2100, Houston, TX 77002."



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